

32692

Customer Number

Patent  
Case No.: 58582US003**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**First Named Inventor: **DAHN, JEFFREY R.**Application No.: **10/757,645**Confirmation No.: **3942**Filed: **January 13, 2004**Title: **METHOD OF PRODUCING LITHIUM ION CATHODE  
MATERIALS****AMENDMENT AND RESPONSE UNDER 37 CFR § 1.111**Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR § 1.8(a)]**

I hereby certify that this correspondence is being:

- ☐ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
- ☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at 571-273-8300.
- ☒ transmitted to United States Patent and Trademark Office on the date shown below via the Office electronic filing system.

Oct. 12, 2007

Date

Susan P. Gumatz

Signed by: Susan P. Gumatz

Dear Sir:

This is in response to the outstanding Office Action, dated May 14, 2007, in the above-identified application.

**Fees**

- ☒ Any required fee will be made at the time of submission via EFS-Web. In the event fees are not or cannot be paid at the time of EFS-Web submission, please charge any fees under 37 CFR § 1.17 which may be required to Deposit Account No. 13-3723.
- ☐ Please charge any fees under 37 CFR §§ 1.16 and 1.17 which may be required to Deposit Account No. 13-3723. (One copy of this sheet marked duplicate is enclosed.)
- ☒ Please charge any additional fees associated with the prosecution of this application to Deposit Account No. 13-3723. This authorization includes the fee for any necessary extension of time under 37 CFR § 1.136(a). To the extent any such extension should become necessary, it is hereby requested.
- ☒ Please credit any overpayment to the same deposit account.

Additional claim fees for this amendment are computed as follows:

<b>Claims As Amended</b>							
(1)	(2)	(3)	(4)		(5)	(6)	(7)
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate	Additional Fee
Total Claims	21	Minus	**	20	1	x \$50.00	\$50.00
Independent Claims	3	Minus	***	3	0	x \$210.00	\$0.00
Additional fee for filing one or more multiple dependent claims, if no such fee has been paid						\$370.00	
<b>Total Additional Fee For This Amendment</b>							<b>\$50.00</b>
** If the "Highest No. Previously Paid For" is less than 20, insert "20" in next space.							
*** If the "Highest No. previously Paid For" is less than 3, insert "3" in next space.							